# **Clinical Case Reports**

Open Access

CLINICAL IMAGE

# The case of a migratory fish bone

Reza Motallebzadeh, Katharine Rutter & Periyathambi Jambulingam

Department of Surgery, Luton & Dunstable Hospital, Lewsey Road, Luton, LU4 0DZ, United Kingdom

#### Correspondence

Reza Motallebzadeh, Specialist Registrar, Department of Surgery, Luton & Dunstable Hospital, Lewsey Road, Luton LU4 0DZ, United Kingdom. Tel: 01582-712121; Fax: 01582-718278; E-mail: rmz1001@yahoo.co.uk

#### **Funding Information**

No funding information provided.

Received: 29 October 2013; Revised: 30 November 2013; Accepted: 7 November 2013

Clinical Case Reports 2014; 2(1): 20

doi: 10.1002/ccr3.40

### **Key Clinical Message**

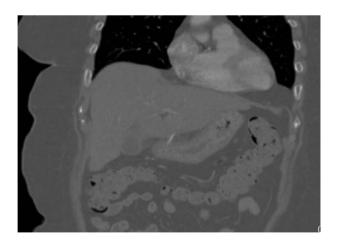
We describe a case of a liver abscess due to an ingested foreign body that had migrated through the stomach. Endoscopic removal was performed and laparotomy was avoided.

#### Keywords

CT scan, liver abscess, endoscopy.

## **Case History**

A 66-year-old lady presented with acute right upper quadrant pain and tenderness. An ultrasound scan showed a hypoechoic area in the left lobe of the liver, and a triple phase liver CT confirmed a 3 cm liver abscess in segment 3, with a foreign body protruding from the



**Figure 1.** Abdominal CT scan showing foreign body extending from stomach into left liver lobe.



**Figure 2.** Upper GI endoscopy showing tip of fish bone protruding through the lesser curvature of the stomach.

gastric antrum to the abscess (Fig. 1). Endoscopy revealed the culprit was a fish bone which had protruded through the antrum of the stomach and into the liver (Fig. 2). The fishbone was removed with a biopsy forceps. The patient had a fish and chips meal as a rare treat the week before.

#### **Conflict of Interest**

None declared.